

KOS Diagnostic Lab

(A Unit of KOS Healthcare)



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NAME : Mrs. LEELA DEVI

AGE/ GENDER : 73 YRS/FEMALE **PATIENT ID** : 1694274

COLLECTED BY :012412090002 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 09/Dec/2024 07:51 AM BARCODE NO. :01522181 **COLLECTION DATE** : 09/Dec/2024 08:04AM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 09/Dec/2024 08:57AM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Value Unit **Biological Reference interval Test Name**

IMMUNOPATHOLOGY/SEROLOGY HEPATITIS B SURFACE ANTIGEN (HBsAg) SCREENING

HEPATITIS B SURFACE ANTIGEN (HBsAg) RESULT

NON REACTIVE

by IMMUNOCHROMATOGRAPHY

INTERPRETATION:-

1.HBsAG is the first serological marker of HBV infection to appear in the blood (approximately 30-60 days after infection and prior to the onset of clinical disease). It is also the last viral protein to disappear from blood and usually disappears by three months after infection in self limiting acute Hepatitis B viral infection.

2. Persistence of HBsAg in blood for more than six months implies chronic infection. It is the most common marker used for diagnosis of an acute Hepatitis B infection but has very limited role in assessing patients suffering from chronic hepatitis.

FALSE NEGATIVE RESULT SEEN IN:

- 1. Window period.
- 2.Infection with HBsAg mutant strains
- 3. Hepatitis B Surface antigen (HBsAg) is the earliest indicator of HBV infection. Usually it appears in 27 41 days (as early as 14 days).
- 4. Appears 7 26 days before biochemical abnormalities. Peaks as ALT rises. Persists during the acute illness. Usually disappears 12-20 weeks after the onset of symptoms / laboratory abnormalities in 90% of cases.
- 5.Is the most reliable serologic marker of HBV infection. Persistence > 6 months defines carrier state. May also be found in chronic infection. Hepatitis B vaccination does not cause a positive HBsAg. Titers are not of clinical value.

NOTE:-

1.All reactive HBsAG Should be reconfirmed with neutralization test(HBsAg confirmatory test).

2.Anti - HAV IgM appears at the same time as symptoms in > 99% of cases, peaks within the first month, becomes nondetectable in 12 months (usually 6 months). Presence confirms diagnosis of recent acute infection.

*** End Of Report ***



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